FORM ROC-DP-10 045

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION REPORT OF CHANGE - INTEREST AND DIVIDENDS TAX RETURN

IRS ADJUSTMENT ONLY

STEP 1	LAST NAME		beginning Mo Day Year FIRST NAME & INITIAL		SOCIAL SECURITY NU	MBER		
SIEP I Place	SPOUSE'S LAST NAM	OUSE'S LAST NAME FIRST NAME & INITIAL SPOUSE'S SOCI				AL SECURITY NUMBER		
LABEL	NAME OF PARTNERS	SHIP OR FIDUCIARY			FEDERAL EMPLOYER	IDENTIFICATION I	NIIMRED	
HERE Otherwise Please Print	NUMBER & STREET				(Partnership or Fiduciary)	BENTITIOATION	NOMBER	
or Type	CITY/TOWN, STATE 8	& ZIP CODE						
STEP 2	□①INDIVIDUAL □② JOINT □③ PARTNERSHIP □④ FIDUCIARY% of NH Ownership							
Entity Type and Mailing Information	☐ Check here if you would like your forms or label mailed to an address other than the above. (See instructions)							
	Number and Stre		City/Town		State		Zip	
STEP 3 Special			lished residency			Mo	Day Year	
Return Type	☐ FINAL RET	☐ FINAL RETURN: Grantor Trust						
	☐ FINAL RET	TURN: Date abando	oned residency				Day Year	
	☐ FINAL RET	URN: Deceased ta	xpayer: Social Security #		Date of	death	Day Year	
		RETURN: For repo	ort of change.					
STEP 4	COMPLETE PAG	GE 2 BEFORE COMP	UTING TAX USING CHANGE	S AS REPORTED ON	YOUR FINAL DET	TERNIMATION	N FROM IRS	
STEP 5 Figure Your Net Taxable Income	6 Gross Taxable Income (Page 2, line 5)							
	Total num 10 Net Taxa k	nber of boxes chec ble Income (Line 8	kedless line 9)	x \$1,200=		9 10		
STEP 6	11 New Hampshire Interest and Dividends Tax (Line 10 x 5%)							
Figure Your Tax, Credits, Interest and Penalties		(b) Payment fror(c) Credit carryo(d) Paid with orig	Application for Extension 1994 Declaration of Est ver from prior years jinal return	imated Tax 12(b 12(c	(d)	12		
		•	l less line 12)			13L		
	14 Additions	` '	(See instructions)	,	, l			
		` '	to Pay (See instructions) to File (See instructions)	•	·			
		` '	ayment of Estimated Tax	•	·	14		
STEP 7 Balance	15 Total Balance Due (Line 13 plus line 14) Make check payable to: State of New Hampshire							
Due or	16 OVERPAYMENT (Line 12 less line 11 adjusted by line 14, if applicable)16							
Overpayment								
FOR DRA USE ONI	<u> </u> _Y		(b) Pofund Place	so allow 12 wooks f	or processing	17(b)		
	(b) Refund - Please allow 12 weeks for processing17(b) Under penalties of perjury, I declare that I have examined this return and to the best of my belief it is true, correct and complete.							
			n the taxpayer, this declaratio					
	Signature (in inl	k)	Date	Signature (in ink) of Pa	aid Preparer Other Than Ta	axpayer		
	If joint return, Bo	OTH husband and wife must s had income.	ign, Date	Preparer's Tax Identific	cation Number		Date	
	3, 5	MAIL TO: NH DEPT OF DOCUMEN PO BOX 20		Preparer's Address				
		I CONCORT	O NH 03302-2035	City/Town, State & Zip	Code		ROC - DP-	

FORM ROC-DP-10

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION REPORT OF CHANGE - INTEREST AND DIVIDENDS TAX RETURN - 1994 (continued)

IRS ADJUSTMENT ONLY

WHEN COMPLETING THIS FORM FOR REPORT OF CHANGE, ENTER THE CHANGES AS REPORTED ON YOUR FINAL DETERMINATION FROM THE IRS.

SOURCE	SOURCE		COLUMN 1		COLUMN 2	
LIST ALL PAYERS AND AMOUNTS IN PARTS A, B, C & D WHETHER TAXABLE BY THE STATE OR NOT PART A - INTEREST INCOME - MUST LIST SOURCE/PAYERS (SEE INSTRUCTIONS)		ENTER ALL AMOUNTS AS SHOWN ON YOUR FEDERAL RETURN		ENTER ONLY THE AMOUNTS THAT ARE TAXABLE TO NEW HAMPSHIRE		
			\$		\$	
			·		·	
-						
-						
Total from any	supplemental schedule attached					
1. TOTALS FO	OR PART A - INTEREST INCOME		\$		\$	
PART B - DIV	DEND INCOME - MUST LIST SOURCE/PAY	ERS (See Instructions)				
			\$		\$	
Total from our	anlamental askedula attached					
	pplemental schedule attached	ADITAL POPTION (See Instructions)	1		1	1
LESS LONG/SHORT TERM CAPITAL GAINS/RETURN OF CAPITAL PORTION (See Instructions) 2. TOTALS FOR PART B - DIVIDEND INCOME			\$	+ /	\$,
	PERAL EXEMPT INTEREST INCOME - MUST	LIST SUIDCE/DAVEDS	ΙΨ		[Ψ	
FART C-FED	PERAL EXEMIT I INTEREST INCOME - MIOST	LIST SOURCE/FATERS			•	
			\$		\$	
-						
Total from any	supplemental schedule attached					
3. TOTALS FOR PART C - FEDERAL EXEMPT INTEREST INCOME			\$		\$	
	THER INCOME SUBJECT TO INTEREST S, ETC. (See Instructions)	AND DIVIDENDS TAX SUCH	AS DISTRIBUTION	IS FROM	S-CORPS, PAR	TNERSHIPS,
ENTITY TYPE	PAYER'S IDENTIFICATION NUMBER	NAME OF	PAYER			
					\$	
4. TOTAL FOR PART D - OTHER INCOME SUBJECT TO INTEREST & DIVIDENDS TAX					\$	
	(ABLE AMOUNTS FROM COLUMN 2, PARTS S AMOUNT ON PAGE 1, LINE 6	S A, B, C & D			\$	

FORM ROC-DP-10 Instructions

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION REPORT OF CHANGE - INTEREST AND DIVIDENDS TAX RETURN -1994 GENERAL INSTRUCTIONS

IRS ADJUSTMENT ONLY

WHO MUST FILE	Individuals who are residents or inhabitants of the state for any part of the tax year must file providing they received more than \$1,200 of taxable interest and/or dividend income for a single individual or \$2,400 of such income for a married couple filing a joint New Hampshire return. (Part-year residents see below.)				
	To determine whether a return must be filed, you should complete either: (a) pages 1 and 2 of the return up to line 8, or (b) the following worksheet:				
	INCOME: 1(a) Total interest income				
	DEDUCTIONS: 2(a) Interest from direct U.S. Obligations				
	EXEMPTIONS: 3 \$1,200 if single, \$2,400 if married				
	TAXABLE INCOME: 4 Subtract lines 2(c) and 3 from line 1(c) to arrive at taxable income				
	If the amount on line 4 is \$0 or less you are not required to file an Interest and Dividends Tax Return. Please ONLY complete Step 1 of the return, check off "NOT REQUIRED TO FILE" (under line 8) and mail the form so that we may remove you from our mailing list.				
JOINT	PARTNERSHIPS, ASSOCIATIONS, TRUSTS AND FIDUCIARIES: Please see separate instructions on page (5).				
FILERS	To ensure your payments are credited to your account, the sequence of names and social security numbers must be consistent on all Interest and Dividends Tax estimates, extensions and returns.				
PART YEAR RESIDENCY	For New Hampshire Interest & Dividends Tax purposes, a "part year resident" is someone who has permanently established residency in New Hampshire during the year or who has permanently abandoned residency in New Hampshire during the year.				
	If you established residency after January 1, 1994, check the "Initial Return" box and enter the date of residency in Step 3. If you abandoned residency during the year, check the "Final Return" box and enter the date in Step 3.				
	A temporary absence for any length of time does not change your state of residency. If you are unsure whether you are a resident of New Hampshire, please call the Taxpayer Assistance Office (603) 271-2186, Monday through Friday, 8:00 a.m. to 4:00 p.m.				
	Part-year residents are entitled to the full \$1,200 exemption (or \$2,400 for joint filers) and the full amount for the exemptions shown in Step 5, line 9 of the return.				
	Part-year residents must file a return if, during the entire year, their taxable income was over \$1,200 (or over \$2,400 for joint filers). However, only the interest and dividends earned during that portion of the year for which they were a New Hampshire resident are taxable.				
WHEN TO FILE	Pursuant to RSA 77:24-b, a Report of Change must be filed with the department no later than 6 months from receipt of a final determination of adjustments from the Internal Revenue Service.				
WHERE TO FILE	MAIL NH Dept of Revenue Administration TO: Document Processing Division PO Box 2035 Concord, NH 03302-2035 Facsimile Returns are Not Accepted				
NEED HELP OR FORMS	Forms are availabel from our web site at www.state.nh.us/revenue. If you need additional forms, please call our forms line at (603) 271-2192. Copies of forms are also available from many public libraries located throughout the state. Hearing or speech impaired individuals may call TDD Access: Relay NH 1-800-735-2964.				
EXTENSION TO FILE	New Hampshire no longer requires taxpayers to file an application for an automatic 7-month extension of time to file provided that the taxpayer has paid 100% of the Interest and Dividends Tax determined to be due by the original due date of the return. If you need to make an additional payment, you must file a Form DP-59-A along with the payment. This application and payment must be postmarked on or before the due date of the return. Failure to pay 100% of the tax due by the original due date will result in the assessment of penalties. You are not required to attach a copy of your federal extension to your return.				
CONFIDEN- TIAL INFORMA- TION	Disclosure of your Social Security Number is mandatory under Department of Revenue Administration rules 221.02 and 906.03 (a)(1) and (c). This information will be verified with the Internal Revenue Service and is confidential in accordance with New Hampshire Revised Statute Annotated 21-J:14.				
	Tax information which is disclosed to the New Hampshire Department of Revenue Administration, either on returns or through Department investigation, is held in strict confidence by law. The Department of Revenue Administration, the United State Internal Revenue Service and other states have agreements under which tax information is exchanged. This is to verify the accuracy and consistency of information reported on federal, state and New Hampshire tax returns.				
ROUNDING OFF	Money items on all Interest and Dividends Tax forms may be rounded off to the nearest whole dollar.				

FORM ROC-DP-10 Instructions

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION REPORT OF CHANGE - INTEREST AND DIVIDENDS TAX RETURN -1994 INSTRUCTIONS

IRS ADJUSTMENT ONLY

STEP 1	Type or print the name and address in the space provided. Individual/Joint returns must include social security number and, if applicable, spouse's social security number in the space provided. Social security numbers are required pursuant to the authority granted by 42 USC section 405.
STEP 2	Entity type. You must check only one box. If a fiduciary or partnership, enter the percentage of ownership by New Hampshire residents.
STEP 3	Check the appropriate box, if any, of the questions which apply to this return and enter the information requested. The amended return box has been prefilled to indicate a Report of Change.
STEP 4	Complete PAGE 2 of the return using the changes as reported on the final determination you received from the IRS. See PAGE 2 Instructions below.
STEP 5	To figure your net taxable income, complete lines 6 through 10. For Individual/Joint filers ONLY, if line 8 is zero, you are not required to file a return. Please check the box under line 8 and submit the return so that we can remove you from our mailing list. If your filing requirements change, please contact the Department of Revenue Administration.
STEP 6	Figure your Interest & Dividends Tax by multiplying line 10 by 5%. Enter the tax on line 11.
	Calculate the tax due by subtracting your payments [line 12(a) through 12(d)] from the tax you calculated (line 11) Enter the remainder balance of tax due on line 13.
	 Figure your penalties, if any, as follows: (a) Interest is calculated on the balance of tax due (line 13) from the original due date to the date paid at 15% for years prior to 1998. Interest due is the tax due x number of days x .000411.) Contact the department for applicable rates in other years. (b) A penalty equal to 10% of any nonpayment or underpayment of taxes shall be imposed if the taxpayer fails to pay when the tax is due. (c) The late filing penalty is 5% of the tax due (line 13) for each month or part thereof for which the return is filed beyond the due date. The total amount shall not exceed 25% of the tax due. Calculate this penalty starting from the original due date of the return until the date a complete return has been filed. (d) If line 11 is more than \$200 you may have been required to file estimated payments during the tax year. To calculate your penalty for nonpayment or underpayment of estimates or to determine if you qualified for an exemption from filing estimate payments, complete Form DP-2210/2220 which may be obtained by calling (603) 271-2192. Enter the total of lines 14(a) through 14(d) on line 14. NOTE: Taxpayers who substantially understate their tax on line 13 may be assessed a penalty by the Department in the amount of 25% of any underpayment of the tax resulting from such understatement. A substantial understatement is one which exceeds the greater of 10% of the amount of tax (line 13) or \$5,000.
STEP 7	If your Interest & Dividends tax (line 11) plus interest and penalties (line 14) is greater than your payments (line 12), then enter on line 15 your balance of tax due. If less than \$1.00, do not pay but still file the return. Make check or money order payable to: State of New Hampshire. Payment must accompany the return; HOWEVER, PLEASE ENCLOSE, BUT DO NOT STAPLE OR TAPE, YOUR PAYMENT WITH THE RETURN. To ensure your check is credited to your account, please put your social security or federal employer identification number on the check.
	If your total tax (line 11) plus interest and penalties (line 14) is less than your payments (line 12), then you have overpaid. Enter the overpayment amount on line 16.
	The taxpayer has an option of applying any part of the overpayment or the total amount of the overpayment as a credit on next year's return. Enter the desired credit on line 17(a). The remainder, which will be refunded, should be entered on line 17(b). If line 17(a) is not completed, the entire overpayment will be refunded. Please allow up to 12 weeks for the Department to process the refund.
STEP 8	You MUST SIGN IN INK AND DATE your return. If you are filing a joint return, both husband and wife must sign in ink and date the return even if only one of you had income. If you paid a preparer to complete this return, then the preparer must also sign and date the return. The preparer must also provide their federal employer identification number and complete address. PAGE 2 INSTRUCTIONS
PRO-RATED INTEREST & DIVIDENDS	Individuals filing as part-year residents must include only the amount of taxable income earned during the period of New Hampshire residency. For your convenience you may prorate interest earned during the year based on the number of days you were a New Hampshire resident, divided by 365, multiplied by the amount of the income.
LINE 1	LINE 1(a) INTEREST INCOME: Enter on line 1(a) ALL interest income. For individual and joint filers the amount to be reported on line 1(a) is from line 8(a) of IRS Form 1040 or 1040A. For partnerships and fiduciary filers, the amount to be reported on line 1(a) is the total of all interest income reported on your federal return. NOTE: All interest income which is not taxable to NH will be deducted on line 4.
	LINE 1(b) DIVIDEND INCOME: Enter on line 1(b) ALL dividend income, including all capital gains and return of capital. Individuals required to file IRS Form 1040 Schedule B must enter here the amount shown Schedule B, line 6. All others enter the amount form line 9 of IRS From 1040 or 1040A. The dividend amount reported on line 1(b) must include the total long/short term capital gains portion and the total return of capital portion as these amounts will be deducted on line 4. Once you have received an amount equal to your cost or other basis, the amount received is taxable as a dividend even if the payer lists an amount as nontaxable. NOTE: All dividend income which is not taxable to NH will be deducted on line 4.
	LINE 1(c) FEDERALLY TAX-EXEMPT INTEREST INCOME: Enter on line 1(c) the amount of ALL federally tax-exempt interest income. For individuals and joint filers, the amount reported on line 1(c) is from IRS Form 1040 or 104A, line 8(b). Unless specifically exempt by New Hampshire law, all federally tax-exempt interest income is taxable to New Hampshire. NOTE: all federal tax-exempt interest income that is not taxable to NH will be deducted on line 4.
LINE 2	OTHER INCOME SUBJECT TO THE NH INTEREST AND DIVIDENDS TAX: The distributions you actually (or constructively) received from: S Corporations, Partnerships, Trusts, Estates MAY be subject to tax and MUST be enter on line 2. ALL NONTAXABLE INCOME WILL BE DEDUCTED ON LINE 4.
	In Line 2: Column A, enter the number which represents the type of entity of the payer. See the box below for ENTITY TYPE CODES. In column B, enter the name of the payer. In column C, enter the payer's identification number if known. In column D, enter the total amount of income (cash, property, etc.) received. The column D amount is the total amount you received or constructively received from the payer during the year and may not correspond to any line on your IRS Form or you IRS K-1 Form. NOTE : This is not a tax or pass through loss or gain from a Form K-1. Therefore, do not add any pass through loss or gain from Form K-1. Entity Code & Type 2 = S-Corp or other Corp., 3 = Partnerships, 4 = Trusts or Estates and 5 = Other.
LINE 3	Enter on line 3 the sum of lines 1(a), 1(b), 1(c), and 2.
LINE 4	INTEREST AND DIVIDENDS INCOME NOT TAXABLE TO NH: In column A, enter the name of the payer. In column B, enter the payer's identification number if known. In column C, enter the amount of income which is not taxable to NH. This amount MUST have been included in lines 1(a), 1(b), 1(c) or 2 in order to be listed here. See example below:
	(A) NAME OF PAYER (B) PAYER'S IDENTIFICATION NUMBER US Government - (T-Bill interest) 11-1111111 \$349.00 XYZ Corporation (Capital gain) 02-9999999 \$422.00 State of NH (Municipal bonds interest) 02-0000000 \$66.00 ABC Corporation (Return of Capital) unknown \$10.0 Total from any supplemental schedule attached Total Non-Taxable Amount
LINE 5	GROSS TAXABLE INCOME: Enter the amount of line 3 minus line 4. Enter this amount on page 1, line 6.
	ROC-DP-10